

**DECLARATION AND POWER OF ATTORNEY**  
(Original Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

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the specification of which is attached hereto and/or was filed on \_\_\_\_\_  
as Application No. \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

**FOREIGN PRIORITY APPLICATION(S)**

			Priority Claimed
			<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>NONE</u>	(Number)	(Country)	(Day/month/year filed)

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional patent application(s) listed below and have also identified below any United States provisional patent application(s) having a filing date before that of the application on which priority is claimed:

**PROVISIONAL PRIORITY PATENT APPLICATION(S)**

<u>60/202,391</u> (Application No.)	<u>May 8, 2000</u> (Filing Date)	<b>Priority Claimed</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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And I hereby appoint the registered attorneys and agents associated with **AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.**, Customer No. 000570, as my attorneys or agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to **Customer No. 000570, namely, AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.**, One Commerce Square, 2005 Market Street, Suite 2200, Philadelphia, Pennsylvania 19103. Please direct all communications and telephone calls to **Louis Sickles II, Esquire** at 215-965-1294.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of first inventor, if any Eric Eckstein

Inventor's Signature Louis Sickles

Date 5/2/01

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Date 5/3/01

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Inventor's Signature Nimesh Shah

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Patent and Trademark Office

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Attorney Docket  
No.: 7963-1079U1

To the Assistant Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Eric Eckstein

John Paranzino

Nimesh Shah

2. Name and address of receiving party(ies):

Checkpoint Systems, Inc.

101 Wolf Drive

Thorofare, New Jersey 08086

(a Pennsylvania corporation)

3. Nature of conveyance:

Assignment       Merger  
 Security Agreement       Change of Name  
 Other:

Execution Dates: May 2 and 3, 2001

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution dates of the application is: May 2 and 3, 2001

A. Patent Application No.(s):

B. Patent No.(s):

Additional numbers attached? [ ] Yes     No

5. Name and address of party to whom correspondence  
document should be mailed:

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6. Total number of applications and patents involved: [1]

7. Total fee (37 C.F.R. 3.41) Cal. 1 x \$40.00 = \$ 40

Check enclosed  
 Authorized to be charged to deposit account

8. Deposit account number: 50-1017

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9. Statement and signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Louis Sickles II  
Name of Person Signing  
Reg. No. 45,803

Signature

Date

Total number of pages including cover sheet, attachments and document: [4]